

## NOTICES OF PROPOSED RULEMAKING

Unless exempted by A.R.S. § 41-1005, each agency shall begin the rulemaking process by 1st submitting to the Secretary of State's Office a Notice of Rulemaking Docket Opening followed by a Notice of Proposed Rulemaking that contains the preamble and the full text of the rules. The Secretary of State's Office publishes each Notice in the next available issue of the *Register* according to the schedule of deadlines for *Register* publication.

Under the Administrative Procedure Act (A.R.S. § 41-1001 et seq.), an agency must allow at least 30 days to elapse after the publication of the Notice of Proposed Rulemaking in the *Register* before beginning any proceedings for adoption, amendment, or repeal of any rule. A.R.S. §§ 41-1013 and 41-1022.

### NOTICE OF PROPOSED RULEMAKING

#### TITLE 4. PROFESSIONS AND OCCUPATIONS

#### CHAPTER 17. JOINT BOARD ON THE REGULATION OF PHYSICIAN'S ASSISTANTS

##### PREAMBLE

<u>1. Sections Affected</u>	<u>Rulemaking Action</u>
R4-17-101	Amend
R4-17-201	Renumber
R4-17-201	New Section
R4-17-202	Repeal
R4-17-202	New Section
R4-17-203	Repeal
R4-17-203	Renumber
R4-17-203	Amend
R4-17-204	Repeal
R4-17-204	New Section
R4-17-205	New Section
R4-17-206	New Section
R4-17-207	New Section
R4-17-208	New Section
R4-17-209	New Section
R4-17-301	Renumber
R4-17-301	New Section
R4-16-302	Repeal
R4-17-302	Renumber
R4-17-302	Amend
R4-17-303	Renumber
R4-17-303	New Section
R4-17-304	Renumber
R4-17-304	Renumber
R4-17-304	Amend
R4-17-305	Renumber
R4-17-305	Amend
R4-17-401	Renumber
R4-17-401	New Section
R4-17-402	Renumber
R4-17-402	New Section
R4-17-403	Renumber
R4-17-403	Amend
R4-17-404	Renumber
R4-17-404	Amend

2. The specific authority for the rulemaking, including both the authorizing statute (general) and the statutes the rules are implementing (specific):

Authorizing statute: A.R.S. § 32-2504(B)

Implementing statutes: A.R.S. §§ 32-2521, 32-2522, 32-2523, 32-2531, 32-2532, 32-2533, 32-2534, 32-2551 and 41-1073.

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**3. The name and address of agency personnel with whom persons may communicate regarding the rulemaking:**

Name: Durena Sprague, Program Administrator  
Address: Joint Board on the Regulation of Physician Assistants  
1651 East Morten, Suite 210  
Phoenix, Arizona 85020  
Telephone: (602) 255-3751  
Fax: (602) 255-1848

**4. An explanation of the rule, including the agency's reasons for initiating the rule:**

Article 1 is expanding and revising the current definitions, defining numerous organization acronyms and other terms necessary to clarify the rules in this Chapter. Article 2 is being amended to add additional specificity to physician assistant certification, including exemption from regular student training registration, qualifications for physician assistants, the certifying examination, temporary certification, regular certification, continuing medical information, renewal of certification, denial of exemption or certification, and change of address. Information required to be provided for applications is specified. As required by A.R.S. § 41-1073, time frames for certification are also being established. Article 3 is being amended to greatly expand the details of the scope of practice for physician assistants. It provides for the delegation of authority for controlled substances, labeling of drugs dispensed by the physician assistant, notification of physician supervision of a physician assistant, necessary reports by a supervising physician, and standards of supervision. Article 4 is being amended to establish civil penalties, define the right to request a hearing, address termination of employment, and revise the existing rehearing rule.

**5. A showing of good cause why the rule is necessary to promote a statewide interest if the rule will diminish a previous grant of authority of a political subdivision of this state:**

Not applicable.

**6. The preliminary summary of the economic, small business, and consumer impact:**

The Board has incurred costs to promulgate the rules and will incur additional costs to notify interested parties of the new rules when the rules are finally approved. These costs are minimal. As these rules essentially update and fully elaborate on the existing practices and procedures already found in statute in rule, economic impacts are expected to be minimal. These rules provide protection of public health and safety while permitting mid-level health care professionals to provide skilled services to consumers. The Joint Board will benefit from the modernization and conciseness of the updated rules and the establishment of clear compliance standards, scope of practice, acceptable continuing medical education and information required for the various applications required by the Board.

There are no expected cost impacts on other governmental entities, health care providers, or other businesses. Supervising physicians of physician assistants should also experience no increased costs. There are also expected to be no ordinary additional costs to individual physician assistants except those already provided for in A.R.S. § 32-2526. Only under the new rule which addresses the imposition of civil penalties will any physician assistant be subject to any additional costs; and, the civil penalties provided for are minimal. There should be no cost impact to consumers as well.

**7. The name and address of agency personnel with whom persons may communicate regarding the accuracy of the economic, small business, and consumer impact statement:**

Name: Durena Sprague, Program Administrator  
Address: Joint Board on the Regulation of Physician Assistants  
1651 East Morten, Suite 210  
Phoenix, Arizona 85020  
Telephone: (602) 255-3751  
Fax: (602) 255-1848

**8. The time, place, and nature of the proceedings for the adoption, amendment, or repeal of the rule or, if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rule:**

Date: June 17, 1997  
Time: 5 p.m.  
Location: Arizona Board of Medical Examiners' Board Room  
1651 East Morten Avenue, Suite 210  
Phoenix, Arizona  
Nature: Public meeting to receive oral or written comments from the public and regulated community regarding the proposed rules.

**9. Any other matters prescribed by statute that are applicable to the specific agency or to any specific rule or class of rules:**

Not applicable.

**10. Incorporations by reference and their location in the rules:**

Not applicable.

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**11. The full text of the rules follows:**

**TITLE 4. PROFESSIONS AND OCCUPATIONS**

**CHAPTER 17. JOINT BOARD ON THE REGULATION OF PHYSICIAN'S ASSISTANTS**

**ARTICLE 1. GENERAL PROVISIONS**

Section

R4-17-101. Definitions

**ARTICLE 2. PHYSICIAN ASSISTANT CERTIFICATION**

Section

R4-17-201. Physician Assistant Student Training Registration Exemption

R4-17-202. Applications

R4-17-202. Qualifications for Physician Assistant

R4-17-203. Continuing Education

R4-17-201-R4-17-203. Certifying Examination

R4-17-204. Change of Address

R4-17-204. Temporary Certification of a Physician Assistant

R4-17-205. Certification of Physician Assistant

R4-17-206. Continuing Education

R4-17-207. Renewal of Certification

R4-17-208. Denial of Exemption, Certification, Recertification, or Cancellation

R4-17-209. Change of Address

**ARTICLE 3. SCOPE OF PRACTICE**

Section

R4-17-301. Delegation of Authority for Schedule II or Schedule III Controlled Substances

R4-17-302. Employment application

R4-17-301-R4-17-302. Drug Labels

R4-17-303. Notification of Supervision

R4-17-303-R4-17-304. Reports

R4-17-304-R4-17-305. Supervision

**ARTICLE 4. REGULATION**

Section

R4-17-401. Civil Penalties

R4-17-402. Request for Hearing

R4-17-401-R4-17-403. Termination of Employment Supervision

R4-17-402-R4-17-404. Rehearing

**ARTICLE 1. GENERAL PROVISIONS**

**R4-17-101. Definitions**

For the purposes of A.R.S. Title 32, Chapter 25 and this Chapter:

1. "ABMS/AOA" means the American Board of Medical Specialties/American Osteopathic Association.
2. "ACCME" means the Accreditation Council for Continuing Medical Education.
3. "Active practice of medicine" means a physician working a minimum of 1000 hours per year in a clinical area with direct patient contact.
4. "AMA" means the American Medical Association.
5. "Approved program" means a physician assistant educational program that has been fully or provisionally accredited by the Committee on Allied Health Education and Accreditation or the Commission on the Accreditation for Allied Health Education Programs upon the recommendation of the Accreditation Review Committee on Education for the Physician Assistant or their successor agencies.
6. "ASAPA" means the Arizona State Association of Physician Assistants.

7. "Board official" means the executive director, deputy director or an investigator of the Board of Medical Examiners, or the program administrator of the Joint Board on the Regulation of Physician Assistants.
8. "CAAHEP" means the Commission on the Accreditation for Allied Health Education Programs.
9. "CAHEA" means the Committee on Allied Health Education and Accreditation.
10. "Category I continuing medical education" means an activity certified as Category I by an institution or organization accredited for continuing medical education by ACCME.
11. "Direction" means authoritative policy or procedural guidance for the accomplishment of a function or activity.
12. "Dispense" means the to issuing issue of 1 or more doses of medication in a suitable container with a label that satisfies all applicable labeling requirements of the Arizona Board of Pharmacy and of R4-17-302 R4-17-402 for subsequent administration to, or use by, a patient or patients.
13. "NCCPA" means the National Commission on the Certification of Physician Assistants.
14. "PANCE" means the Physician Assistant National Certifying Examination.
15. "Prescribe" means to issuing issue:
  - a. A signed, written order to a pharmacist for drugs or medical devices; or
  - b. An order transmitted to a pharmacist by word of mouth, telephone, or other means of communication.
16. "Service" means personal delivery or mailing by certified mail to the physician assistant or applicant affected by a decision of the Joint Board at the physician assistant's or applicant's last known residence or place of business.
17. "Supervision" means the opportunity or ability of the a physician to provide or exercise control and direction over the services of a physician assistant but does not require the constant physical presence of the physician as long as the supervising physician or the supervising physician agent and the physician assistant are or can be easily in contact with each other by radio, telephone, or telecommunication.

**ARTICLE 2. PHYSICIAN ASSISTANT CERTIFICATION**

**R4-17-201. Physician Assistant Student Training Registration Exemption**

- A. A physician assistant student who wishes an exemption from regular certification while in the course of an approved physician assistant training program in accordance with A.R.S. § 32-2521(B)(3)(a) shall provide the following information to the Joint Board at least 10 days before beginning the clinical phase of the training program, on a form provided by the Joint Board:
  1. Physician assistant student's full name, current complete address, date of birth, and social security number, at the discretion of the applicant;
  2. A notarized, sworn statement by the student verifying the truthfulness of the information provided.
- B. In addition to the requirements of subsection (A), a physician assistant student applying for an exemption from regular certification shall arrange to have directly submitted to the

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Joint Board a notarized physician assistant program certification, completed and signed by the physician assistant program dean or director, that certifies that the student is currently engaged in a physician assistant training program, and provides the name of the program, the date the program was approved for physician assistant training by CAAHEP, and the student's training commencement date and anticipated date of completion;

- C. Upon receipt of the application, the Joint Board shall grant an exemption from regular certification unless the application evidences noncompliance with A.R.S. § 32-2521(A)(3) through (6)

**R4-17-202. Applications**

All applications for approval of employment and modification of employment shall:

1. Be accompanied by the prescribed fee;
2. Contain the oath of the applicant that all information contained in the application and evidence submitted with it are true and correct and that the credentials submitted were not procured by fraud;
3. Become property of the Board and part of its permanent record;
4. Not be returned to a withdrawing applicant;

**R4-17-202. Qualifications for Physician Assistant**

An applicant for temporary certification or certification as a physician assistant shall submit a preliminary questionnaire on a form furnished by the Joint Board that provides the following information:

1. Applicant's full name;
2. Applicant's mailing and office addresses;
3. Applicant's home and office phone numbers;
4. Applicant's birth place and date of birth;
5. Name of the physician assistant program attended by the applicant, its location, and the applicant's degree date;
6. Applicant's NCCPA certificate number, the date it was issued, and whether it is current;
7. Any other state certification, registration, or licensure, including in other health professions held by the applicant;
8. Whether the applicant has ever had an application for certification, registration, or licensure to perform health care tasks denied or rejected by another state or province licensing board;
9. Whether the applicant has had any action, restriction, limitation, including probation or academic probation, taken while the applicant was participating in a training program or by a health care provider;
10. Whether the applicant has ever been found guilty or entered into a plea of no contest to a felony, or to a misdemeanor involving moral turpitude in any state;
11. Whether any action has ever been initiated against the applicant by or through any medical board or association;
12. Whether the applicant has ever had a certification to perform health care tasks revoked, suspended, limited, restricted, placed on probation, voluntarily surrendered, or canceled during an investigation or in lieu of disciplinary action, or entered into a consent agreement or stipulation;
13. Whether the applicant has ever had hospital privileges revoked, denied, suspended, or restricted in any way;
14. Whether the applicant has ever been named as a defendant in any malpractice matter that resulted in a settlement or judgment against the applicant in excess of \$20,000;

15. Whether the applicant has ever been convicted of Medicare or Medicaid fraud or received sanctions, including restriction, suspension, or removal from practice, imposed by an agency of the federal government;
16. Whether the applicant has ever had the ability to prescribe, dispense, or administer medications limited, restricted, modified, denied, surrendered, or revoked by a federal or state agency;
17. Whether the applicant has ever been counseled regarding the applicant's performance or behavior in any training program or by any health care provider;
18. Whether the applicant has ever taken a leave of absence as a result of the applicant's performance or behavior in the course of any training program or work with a health care provider;
19. Whether the applicant has any chronic ailment communicable to others;
20. Whether the applicant has a medical condition that in any way impairs or limits the applicant's ability to safely practice any type of health care tasks within the scope of practice for physician assistants;
21. Whether the applicant, within the last 10 years, has been diagnosed with or treated for bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
22. Whether the applicant has, since attaining the age of 18 or within the last 10 years, whichever period is shorter, been admitted to a hospital or other facility for the treatment of bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
23. Whether the applicant has a disability, including alcohol or drug use, that may affect the applicant's ability to safely perform health care tasks;
24. Applicant's social security number, at the applicant's discretion; and,
25. Sworn statement by the applicant verifying the truthfulness of the information provided by the applicant.

**R4-17-203. Continuing Education**

- A. For the purpose of fulfilling the continuing medical education requirements of A.R.S. § 32-2523(C), each certificate holder shall submit an affidavit on a form provided by the Board which shows the continuing medical education completed by the certificate holder within the previous year.
- B. Approved continuing medical education activities include the following:
1. Education for an advanced degree in a medical or medically-related field in a teaching institution approved by the American Academy of Physician's Assistants, Committee on Allied Health Education and Accreditation, Association of American Medical Colleges, American Medical Association or the American Osteopathic Association;
  2. Medical education programs designed to provide an understanding of current developments, skill, procedures or organizations or institutions that have been accredited by the American Academy of Physician's Assistants, American Medical Association, American Academy of Family Physicians, American College of Surgeons, American Osteopathic Association or a state medical association;
  3. Credit hours which provide an understanding of current developments, skill, procedures or treatment related to the practice of medicine may be earned by any of the following activities:
    - a. completion of a medical education program based on self instruction which utilized videotapes, audiotapes, films, filmstrips, slides, radio broadcasts or

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- computers and which are designated Category I by an organization referred to in paragraph (1);
- b. preparation for the National Commission on the Certification of Physician's Assistants recertification examination.
- C. Prior to renewal of certification the Board will randomly select 50% of the affidavits submitted by persons who have not timely completed their continuing medical education requirements during each of the 3 previous renewal periods and 10% of the remaining affidavits to verify the accuracy of their content and of the acceptability of the programs attended. Certificate holders whose affidavits have been selected shall submit whatever additional information may be necessary to assist in the verification.

**R4-17-201.R4-17-203. Certifying Examination**

- A. An applicant for certification as a physician's assistant shall pass the certifying examination of the National Commission on the Certification of Physician's Assistants NCCPA.
- B. An applicant who presents a certificate issued by the National Commission on the Certification of Physician's Assistants NCCPA that which shows that the applicant has passed the appropriate either the PANCE NCCPA examination within the 6-year period preceding its presentation to the Joint Board or the NCCPA recertification examination within the 2-year period preceding presentation of the certificate to the Joint Board, and which has not been suspended or revoked due to medical incompetence since the examination, shall will be deemed to have met the requirement of A.R.S. § 32-2521(A)(2).

**R4-17-204. Change of Address**

Each person certified as a physician's assistant in this state shall promptly and in writing inform the Board of the following:

1. Current residence and office address;
2. Any change of residence or office address that may later occur.

**R4-17-204. Temporary Certification of a Physician Assistant**

- A. An applicant for temporary certification as a physician assistant shall submit, on a form furnished by the Joint Board, the following information:
1. Applicant's full name;
  2. Applicant's mailing and office addresses;
  3. Applicant's home and office phone numbers;
  4. Applicant's birth place and date of birth;
  5. Names of the states or provinces in which applicant has ever been granted a certification, registration, or license as a physician assistant, including certificate number, date issued and the current status of the certification;
  6. Whether the applicant has ever had an application for certification, registration, or licensure to perform health care tasks denied or rejected by another state or province licensing board;
  7. Whether the applicant has had any action, restriction, limitation, including probation or academic probation, taken against the applicant while the applicant was participating in any type of training program or by a health care provider;
  8. Whether the applicant has ever been charged with a violation of a statute, rule, or regulation of any domestic or foreign governmental agency;
  9. Whether the applicant has ever been found guilty or entered into a plea of no contest to a felony, or to a misdemeanor involving moral turpitude in any state;
  10. Whether any action has ever been initiated against the applicant by or through any medical board or association;

11. Whether the applicant has ever had a certification to perform health care tasks revoked, suspended, limited, restricted, placed on probation, voluntarily surrendered, or canceled during an investigation or in lieu of disciplinary action, or entered into a consent agreement or stipulation;
  12. Whether the applicant has ever had hospital privileges revoked, denied, suspended, or restricted in any way;
  13. Whether the applicant has ever been named as a defendant in any malpractice matter that resulted in a settlement or judgment against the applicant in excess of \$20,000;
  14. Whether the applicant has ever been convicted of Medicare or Medicaid fraud or received sanctions, including restriction, suspension, or removal from practice, imposed by an agency of the federal government;
  15. Whether the applicant has ever had the ability to prescribe, dispense, or administer medications limited, restricted, modified, denied, surrendered, or revoked by a federal or state agency;
  16. Whether the applicant has a chronic ailment communicable to others;
  17. Whether the applicant has a medical condition that in any way impairs or limits the applicant's ability to safely practice any type of health care tasks within the scope of practice for physician assistants;
  18. Whether the applicant, within the last 10 years, has been diagnosed with or treated for bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
  19. Whether the applicant has, since attaining the age of 18 or within the last 10 years, whichever period is shorter, been admitted to a hospital or other facility for the treatment of bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
  20. Whether the applicant has ever taken a leave of absence, other than for pregnancy, during the applicant's physician assistant training program, preceptorship training, or other practice;
  21. Applicant's whereabouts and nature of practice from graduation from physician assistant training to present, indicating the exact month, date, and year for each;
  22. Sworn statement by the applicant verifying the truthfulness of the information provided by the applicant, that the applicant has not engaged in any acts prohibited by the statutes of Arizona, including the rules of the Joint Board, and a records/documentation release.
- B. In addition to the required application, an applicant for temporary certification shall submit the following:
1. Certified photocopy of the applicant's birth certificate or the applicant's passport;
  2. Certified evidence of legal name change if the legal name is different from that shown on a certificate filed in accordance with subsection (B)(1);
  3. Photocopy of any certificate of release from the U.S. military or public health service or, if applicable, a letter from any commanding officer setting forth the dates of active duty, assignments, and anticipated date of release from active duty;
  4. Photocopy of the applicant's diploma awarded upon successful completion of a physician assistant training program or a letter from the program that provides the date of the applicant's successful completion;
  5. On a form included with this application, a listing of all employment as a physician assistant, indicating the medical agency of employment, supervising physician, address, and exact dates of employment;

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6. The required fee.
- C. In addition to the requirements of subsections (A) and (B), an applicant for temporary certification shall arrange to have directly submitted to the Joint Board the following:
  1. Letter verifying the applicant's registration for the NCCPA certifying examination from the NCCPA;
  2. All of the forms attending the application, including the disciplinary investigation form to be completed by the Federation of State Medical Boards, a physician assistant training program certification, a verification of certification/licensure/registration, medical agency of employment/supervising physician form, completed by the appropriate parties; and,
  3. Medical Agency of Employment/Supervising Physician form completed by the applicant's supervising physicians for the past 5 years.
- D. Prior to being granted a temporary certification by the Joint Board, an applicant for a temporary certification shall enter into a written agreement with the Joint Board in which the applicant agrees to perform health care tasks only in settings where the supervising physician practices medicine at the same geographic location at all times. The temporary certification shall terminate upon the issuance of a permanent certificate or upon evidence that the physician assistant failed the NCCPA certification examination.
- E. For a temporary certification, the overall time frame described in A.R.S. § 41-1072(2) is 120 calendar days.
- F. For a temporary certification, the administrative completeness review time frame described in A.R.S. § 41-1072(1) is 30 calendar days from the date the Joint Board receives all documents required by R4-17-204.
  1. If the required application is not administratively complete, the Joint Board shall send to the applicant a deficiency notice.
    - a. The notice shall state each deficiency and the information or documents needed to complete the application.
    - b. Within 365 calendar days from the date of mailing of a deficiency notice, an applicant shall submit to the Joint Board the missing documents or information specified in the notice. The 30-day time frame for the Joint Board to finish the administrative completeness review is suspended from the date the Joint Board mails the deficiency notice to the applicant until the date the Joint Board receives the documents or information.
    - c. Pursuant to A.R.S. § 32-2522(G), if an applicant does not submit the missing documents and information specified in the notice within the time frame in subsection (F)(1)(b), the application is deemed withdrawn.
  2. If the application is administratively complete, the Joint Board shall send a written notice of administrative completeness to the applicant.
  3. If the application and submitted documents and information do not contain all of the components required by statute or rule, the Joint Board may send a written notice of denial of temporary certification to the applicant.
- G. For a temporary certification, the substantive review time frame described in A.R.S. § 41-1072(3) is 90 calendar days and begins on the date the Joint Board sends written notice of administrative completeness to the applicant.
  1. During the substantive review time frame, the Joint Board may make 1 comprehensive written request for additional information.

- a. Within 90 calendar days from the date of mailing of a comprehensive written request for additional information, the applicant shall submit to the Joint Board the requested additional information. The 90-day time frame for the Joint Board to finish the substantive review is suspended from the date the Joint Board provides the comprehensive written request for additional information to the applicant until the Joint Board receives the requested additional information.
  - b. The Joint Board shall issue a written notice of denial of temporary certification if:
    - i. The applicant does not submit the requested additional information within the time frame in subsection (G)(1)(a); or
    - ii. The Joint Board determines that the applicant does not meet all of the substantive criteria required by statute or rule for temporary certification.
2. If the applicant meets all of the substantive criteria required by statute or rule for temporary certification, the Joint Board shall issue a temporary certificate to the applicant.

**R4-17-205. Certification of Physician Assistant**

- A. An applicant for certification as a physician assistant shall submit, on a form furnished by the Joint Board, the following information:
  1. Applicant's full name;
  2. Applicant's office addresses;
  3. Applicant's office phone numbers;
  4. Applicant's birth place and date of birth;
  5. Names of the states or provinces in which applicant has ever been granted a certification, registration, or license as a physician assistant, including certificate number, date issued, and the current status of the certification;
  6. Whether the applicant has ever had an application for certification, registration, or licensure to perform health care tasks denied or rejected by another state or province licensing board;
  7. Whether the applicant has had any action, restriction, limitation, including probation or academic probation, taken against the applicant while the applicant was participating in a training program or by a health care provider;
  8. Whether the applicant has ever been charged with a violation of a statute, rule, or regulation of any domestic or foreign governmental agency;
  9. Whether the applicant has ever been found guilty or entered into a plea of no contest to a felony, or to a misdemeanor involving moral turpitude in any state;
  10. Whether any action has ever been initiated against the applicant by or through any medical board or association;
  11. Whether the applicant has ever had a certification to perform health care tasks revoked, suspended, limited, restricted, placed on probation, voluntarily surrendered, or canceled during an investigation or in lieu of disciplinary action, or entered into a consent agreement or stipulation;
  12. Whether the applicant has ever had hospital privileges revoked, denied, suspended, or restricted in any way;
  13. Whether the applicant has ever been named as a defendant in any malpractice matter that resulted in a settlement or judgment against the applicant in excess of \$20,000;
  14. Whether the applicant has ever been convicted of Medicare or Medicaid fraud or received sanctions, including

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- restriction, suspension, or removal from practice, imposed by an agency of the federal government;
15. Whether the applicant has ever had the ability to prescribe, dispense, or administer medications limited, restricted, modified, denied, surrendered, or revoked by a federal or state agency;
  16. Whether the applicant has a chronic ailment communicable to others;
  17. Whether the applicant has a medical condition that in any way impair or limits the applicant's ability to safely practice any type of health care tasks within the scope of practice for physician assistants;
  18. Whether the applicant, within the last 10 years, has been diagnosed with or treated for bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
  19. Whether the applicant has, since attaining the age of 18 or within the last 10 years, whichever period is shorter, been admitted to a hospital or other facility for the treatment of bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
  20. Whether the applicant has ever taken a leave of absence, other than for pregnancy, during the applicant's physician assistant training program, preceptorship training, or other practice;
  21. Applicant's whereabouts and nature of practice from graduation from physician assistant training to present, indicating the exact month, date and year for each;
  22. Sworn statement by the applicant verifying the truthfulness of the information provided by the applicant, that the applicant has not engaged in any acts prohibited by the statutes of Arizona, including the rules of the Joint Board, and a records/documentation release.
- B. In addition to the required application, an applicant for certification shall submit the following:
1. Certified photocopy of the applicant's birth certificate or the applicant's passport;
  2. Certified evidence of legal name change if the legal name is different from that shown on a certificate filed in accordance with subsection (B)(1);
  3. Photocopy of any certificate of release from the U.S. military or public health service or, if applicable, a letter from any commanding officer setting forth the dates of active duty, assignments, and anticipated date of release from active duty;
  4. A photocopy of the applicant's diploma awarded upon successful completion of a physician assistant training program;
  5. On a form included with this application, a listing of all employment as a physician assistant, indicating the medical agency of employment, supervising physician, address and exact dates of employment;
  6. The required fee.
- C. In addition to the required application, an applicant for certification shall submit or shall cause the following forms provided by the Joint Board to be submitted directly to the Joint Board:
1. A copy of the applicant's certificate of successful completion of the certifying examination of the NCCPA and the applicant's examination score provided by the NCCPA;
  2. All of the forms attending the application, including the disciplinary investigation form to be completed by the Federation of State Medical Boards, a physician assistant training program certification, a verification of certification/licensure/registration, medical agency of employment/supervising physician form, completed by the appropriate parties;
3. Medical Agency of Employment/Supervising Physician form completed by the applicant's supervising physicians for the past 5 calendar years.
  4. A form completed and signed by the Coordinator of the Disciplinary Data Bank, The Federation of State Medical Boards, which includes the applicant's full name and address, birth date, social security number, physician assistant training program name and location, and date of the applicant's degree/graduation, for purposes of a disciplinary search.
  5. A form completed, signed, and sealed by the physician assistant program that granted the applicant a physician assistant degree, which includes the applicant's full name, type of degree, name of program, date the applicant's degree was granted, date of the applicant's matriculation, and a 2½" by 3" passport type photo of the applicant taken within 60 days of the date of application and endorsed across the front by the applicant's signature. The program shall also provide the following information:
    - a. Whether the applicant was required to repeat any segment of training;
    - b. Whether any action, restriction, limitation, including probation or academic probation, was taken against the applicant while the applicant was participating in the training program;
    - c. Whether the applicant was counseled regarding performance or behavior in the training program;
    - d. Whether the applicant took a leave of absence, other than for pregnancy, during the applicant's training program or preceptorship;
    - e. Whether the student had a chronic ailment communicable to others;
    - f. Whether the applicant had a medical condition that in any way impaired or limited the applicant's ability to safely practice any type of health care tasks within the scope of practice for physician assistants;
    - g. Whether, within the last 10 years, the applicant was diagnosed with or treated for bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
    - h. Whether the applicant, since attaining age 18 or within the last 10 years, whichever period is shorter, was admitted to a hospital or other facility for the treatment of bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
    - i. Whether the student's final evaluations in every category rated at least satisfactory. If not, the program shall attach a photocopy of the evaluation and a written explanation.
  6. A verification of certification/licensure/registration completed, signed, and sealed by the board of each state in which the applicant holds or has held certification or registration as a physician assistant. The verification shall provide the name of the state, the physician assistant's name, the program from which the physician assistant graduated, the physician assistant's certification or registration number and its date of issuance, any endorsement, and whether the certification or registration is current. The state shall also provide the following information:



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- a. Whether the physician assistant's certificate/license/registration was revoked, suspended, limited, restricted, placed on probation, voluntarily surrendered, or canceled during an investigation or in lieu of disciplinary action, or entered into a consent agreement or stipulation;
  - b. Whether the physician assistant had a chronic ailment communicable to others;
  - c. Whether the physician assistant had a medical condition that in any way impaired or limited the physician assistant's ability to safely practice any type of health care tasks within the scope of practice for physician assistants;
  - d. Whether, within the last 10 years, the applicant was diagnosed with or treated for bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
  - e. Whether the applicant, since attaining age 18 or within the last 10 years, whichever period is shorter, was admitted to a hospital or other facility for the treatment of bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder.
7. A medical agency or employment/supervising physician form completed, signed, and sealed by all medical agencies or supervising physicians where the applicant is currently employed or was employed in the last 5 years. The form shall provide the name of the medical agency or supervising physician, dates of the applicant's employment, and names, locations, and dates of each hospital, office, or clinic where the physician is or was assigned. The medical agency or employing/supervising physician shall also provide the following information:
- a. Whether an action, restriction, limitation, including probation or academic probation, was taken against the applicant while the applicant was in the agency's or physician's employment;
  - b. Whether the applicant was counseled regarding performance or behavior while in the agency's or physician's employment;
  - c. Whether the applicant took a leave of absence, other than for pregnancy, while in the agency's or physician's employment;
  - d. Whether, to the agency's or physician's knowledge, the applicant had a chronic ailment communicable to others;
  - e. Whether, to the agency's or physician's knowledge, the applicant had a medical condition that in any way impaired or limited the applicant's ability to safely practice any type of health care tasks within the scope of practice for physician assistants;
  - f. Whether, to the agency's or physician's knowledge, within the last 10 years, the applicant was diagnosed with or treated for bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
  - g. Whether, to the agency's or physician's knowledge, the applicant, since attaining age 18 or within the last 10 years, whichever period is shorter, was admitted to a hospital or other facility for the treatment of bi-polar disorder, schizophrenia, paranoia or any other psychotic disorder.
8. A form completed by the applicant that lists all current or past employment with medical agencies or supervising physicians within the past 5 years or since graduation from a physician assistant program, if less than 5 years, including the agency or physician name, address, and dates of employment.
9. An affidavit completed and subscribed under oath by the applicant that certifies the applicant has received a copy of, read, and will comply with the laws and rules governing the performance of health care tasks by physician assistants in Arizona.
- D. For an initial certification, the overall time frame described in A.R.S. § 41-1072(2) is 120 calendar days.
- E. For an initial certification, the administrative completeness review time frame described in A.R.S. § 41-1072(1) is 30 calendar days from the date the Joint Board receives all documents and information required by R4-17-205.
1. If the required application is not administratively complete, the Joint Board shall send to the applicant a deficiency notice.
    - a. The notice shall state each deficiency or missing document and the documents and information needed for completion.
    - b. Within 365 calendar days from the date of mailing of a deficiency notice, an applicant shall submit to the Joint Board the missing documents and information specified in the notice. The 30-day time frame for the Joint Board to finish the administrative completeness review is suspended from the date the Joint Board mails the deficiency notice to the applicant until the date the Joint Board receives the documents and information.
    - c. Pursuant to A.R.S. § 32-2522(G), if an applicant does not submit the missing documents and information specified in the notice within the time frame in subsection (E)(1)(b), the application is deemed withdrawn and the application and all submitted documents shall be returned to the applicant.
  2. If the application is administratively complete, the Joint Board shall send a written notice of administrative completeness to the applicant.
  3. If the application and submitted documents and information do not contain all of the components required by statute or rule, the Joint Board may send a written notice of denial of certification to the applicant.
- E. For an initial certification, the substantive review time frame described in A.R.S. § 41-1072(3) is 90 calendar days and begins on the date the Joint Board sends written notice of administrative completeness to the applicant.
1. During the substantive review time frame, the Joint Board may make 1 comprehensive written request for additional information.
    - a. Within 270 calendar days from the date of mailing of a comprehensive written request for additional information, the applicant shall submit to the Joint Board the requested information. The 90-day time frame for the Joint Board to finish the substantive review is suspended from the date the Joint Board provides the comprehensive written request for additional information to the applicant until the Joint Board receives the requested additional information.
    - b. The Joint Board shall issue a written notice of denial of certification if:
      - i. The applicant does not submit the requested additional information within the time frame in subsection (F)(1)(a); or
      - ii. The Joint Board determines that the applicant does not meet all of the substantive criteria required by statute or rule for certification.
  2. If the applicant meets the substantive criteria required by statute or rule for certification, the Joint Board shall issue a certificate to the applicant.



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**R4-17-206. Continuing Education**

- A. Every calendar year, a physician assistant holding a current certificate in this state shall complete the 20 credit hours of the continuing medical education required by A.R.S. § 32-2523. One hour of credit shall be allowed for each clock hour of participation in approved continuing medical education activities, unless otherwise designated in subsection (B).
- B. Approved continuing medical education activities include the following:
1. Education for an advanced degree in a medical or medically-related field at a teaching institution approved by the American Medical Association or the Association of American Medical Colleges, the American Osteopathic Association or the American Academy of Physician Assistants. One credit hour may be claimed for each full day of study. Less than full-day study shall be claimed on a pro-rata basis.
  2. Full-time research at a teaching institution approved by the American Medical Association, the Association of American Medical Colleges, the American Osteopathic Association or CAAHEP. One credit hour may be claimed for each full day of research. Less than full-day research shall be claimed on a pro-rata basis.
  3. Education certified as Category I by an organization accredited by ACCME or CAAHEP.
  4. Medical educational programs designed to provide necessary understanding of current developments, skills, procedures, or treatments related to the performance of health care tasks, provided by organizations or institutions that have not been accredited by the ACCME or CAAHEP.
  5. Serving as an instructor of physician assistant students, house staff, other physician assistants or allied health professionals from a hospital or institution with a formal training program, where the instructional activities will provide the participants with necessary understanding of current developments, skills, procedures, or treatments related to the performance of health care tasks. One credit hour may be claimed for each full day of instruction. Less than full-day instruction shall be claimed on a pro-rata basis.
  6. Publication or presentation of a paper, report, or book that deals with current developments, skills, procedures, or treatments related to the performance of health care tasks. Credits shall be claimed only once for materials presented. Credits shall be claimed as of the date of publication or presentation. One credit hour may be reported for each hour of preparation, writing and/or presentation.
  7. Credit hours may be claimed on the basis of 1 credit hour for each full day of an activity for any of the following activities that provide necessary understanding of current developments, skills, procedures, or treatment related to the performance of health care tasks:
    - a. Completion of a physician assistant education program based on self-instruction using videotapes, audiotapes, films, filmstrips, slides, radio broadcasts, or computers;
    - b. Independent reading of scientific journals and books;
    - c. Preparation for NCCPA certification or recertification examinations; or,
    - d. Participation on a staff committee or quality of care and/or utilization review in a hospital or institution or government agency.

- C. If an individual holding a current physician assistant certificate in this state fails to meet the requirements of this Section due to illness, military service, medical or religious missionary activity, residence in a foreign country, or other extenuating circumstance, the Joint Board may grant, on an individual basis, an extension of time to complete the continuing education upon receipt, at least 30 days before expiration of the physician assistant's current certification, of a written request from the physician assistant that details the reasons for the extension request.

**R4-17-207. Renewal of Certification**

- A. For the purpose of renewal of certification and fulfilling the continuing medical education requirements of A.R.S. § 32-2523(B), a certificated physician assistant shall submit an affidavit, on a form provided by the Joint Board, that provides the following information regarding the physician assistant and the continuing medical education completed by the physician assistant within the previous year:
1. Applicant's Arizona certificate number;
  2. Applicant's social security number, at the physician assistant's discretion;
  3. Applicant's DEA number, if the physician assistant has 1, the date it was issued, and the date it expires.
  4. Full name of the applicant.
  5. Applicant's office and home addresses;
  6. Applicant's office and home phone numbers;
  7. Applicant's medical directory/mailling addresses;
  8. Applicant's current supervising physician and the physician's address;
  9. The applicant's specialty field of practice;
  10. Whether the applicant maintains current NCCPA certification;
  11. Whether the applicant has been named as a defendant in any malpractice matter that resulted in a settlement or judgment against the physician assistant in excess of \$20,000.
  12. Whether the applicant has been convicted of Medicare or Medicaid fraud or received sanctions, including denial, disciplinary action, limitation, restriction, or any agreement, including rehabilitation, suspension, loss/revocation, or removal from practice, imposed by a state or federal agency;
  13. Whether the applicant's ability to prescribe, dispense, or administer medications has been limited, restricted, modified, denied, surrendered, or revoked by a federal or state agency;
  14. Whether the applicant has a chronic ailment communicable to others;
  15. Whether the applicant has a medical condition that impairs or limits the physician assistant's ability to safely perform any type of health care tasks within the scope of practice for physician assistants;
  16. Whether the applicant was diagnosed with or treated for bi-polar disorder, schizophrenia, paranoia, or any other psychotic disorder;
  17. Whether the applicant was admitted to a hospital or other facility for the treatment of bi-polar disorder, schizophrenia, paranoia or any other psychotic disorder;
  18. Whether the applicant has taken a leave of absence during the physician assistant's practice other than for pregnancy;
  19. Whether the applicant has been treated for use or misuse of any chemical substance, and
  20. Dated and sworn statement by the applicant verifying that during the past certificate year, July 1 through June 30, the physician assistant completed a minimum of 20 hours

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of Category I continuing medical education in accordance with R4-17-206.

- B. Prior to renewal of certification, the Joint Board may randomly select a number of affidavits of completion of continuing education to verify the accuracy of their content and the acceptability of the programs attended. Certificate holders whose affidavits have been selected shall submit any additional information requested by the Joint Board to assist in the verification.
- C. For purposes of this Section, "ability to safely perform any type of health care tasks within the scope of practice for physician assistants" means:
1. The cognitive capacity to make appropriate clinical diagnoses and exercise reasoned medical judgments and to learn and keep abreast of medical developments;
  2. The ability to communicate those judgments and medical information to patients and other health care providers with or without the use of aids or devices such as a voice amplifier; and
  3. The physical capability to perform medical tasks such as physical examination and minor surgical procedures with or without the use of aids or devices such as corrective lenses or hearing aids.
- D. For purposes of this Section, "medical condition" means physiological, mental, or psychological conditions or disorders, such as, but not limited to, orthopedic, visual, speech and hearing impairments; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer; heart disease; diabetes; mental retardation; emotional or mental illness; specific learning disabilities; HIV disease; tuberculosis; drug addiction; and alcoholism.
- E. For renewal of certification, the overall time frame described in A.R.S. § 41-1072(2) is 30 calendar days.
- E. For renewal of certification, the administrative completeness review time frame described in A.R.S. § 41-1072(1) is 30 calendar days and begins on the date the Joint Board receives the renewal application.
1. If the renewal application is not administratively complete, the Joint Board shall send to the applicant a deficiency notice. The notice shall state each deficiency and the information and documents needed to complete the application.
  2. The 30-day time frame for the Joint Board to finish the administrative completeness review is suspended from the date the Joint Board mails the deficiency notice to the applicant until the date the Joint Board receives the documents and information.
  3. If an applicant does not submit a complete renewal application before October 1 of the year the current certification expires, the certificate shall expire.
  4. If the submitted application is administratively complete, the Joint Board shall send a written notice of renewal of certification to the applicant.

**R4-17-208. Denial of Exemption, Certification, Recertification, or Cancellation**

An applicant or physician assistant who is denied an extension to complete continuing education, exemption, temporary certification, certification, recertification, or cancellation may request a hearing to contest the matter by filing a written notice with the Joint Board within 15 days of receipt of notice of the Joint Board's action. A hearing shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 6.

**R4-17-209. Change of Address**

An individual holding a current certificate as a physician assistant in this state shall, in writing, inform the Joint Board of each change

in residence and office address or telephone number within 30 days of its occurrence.

**ARTICLE 3. SCOPE OF PRACTICE**

**R4-17-301. Delegation of Authority for Schedule II or Schedule III Controlled Substances**

- A. A supervising physician who wishes to delegate authority for prescribing, dispensing, or administering Schedule II or III controlled substances to a physician assistant, shall submit with the physician assistant, on an application form provided by the Joint Board, the following information:
1. Full name of the supervising physician, the physician's Arizona license number and date of issuance, the physician's work address and phone number, the physician's field of practice, board certification and ABMS/AOA certification number;
  2. Whether the supervising physician's medical license has been revoked, placed on probation, restricted in any way, or suspended either by agreement or otherwise in any state;
  3. Whether the supervising physician's Drug Enforcement Administration or state prescriptive permit has ever been denied, restricted, suspended, lost, or revoked;
  4. Whether the supervising physician maintains hospital privileges and whether the privileges have ever been denied, revoked, suspended, or limited in any way;
  5. Whether the supervising physician supervises any other physician assistants and, if so, the names of the physician assistants supervised;
  6. Full name of the physician assistant, the physician assistant's Arizona certification number, work address, and work telephone number;
  7. Whether, at the time of the application, the supervising physician is subject to disciplinary action in any other state or country for an act or conduct that constitutes grounds for disciplinary action;
  8. Whether the physician assistant has ever had a physician assistant certification refused, suspended, or revoked by another state or country for reasons that relate to the physician assistant's ability to engage skillfully in the health care tasks of a physician assistant;
  9. Whether the physician assistant's Drug Enforcement Administration registration or state prescriptive permit has ever been denied, restricted, suspended, lost, or revoked;
  10. Whether the physician assistant maintains hospital privileges and whether the privileges have ever been denied, revoked, suspended, or limited in any way;
  11. Whether the supervising physician is delegating authority to prescribe, dispense, and administer Schedule II or III drugs, or both;
  12. Statement signed by both the supervising physician and physician assistant certifying that both have read and will abide by the law and rules governing the practice of a physician assistant, including prescribing, dispensing, and administering drugs, that the supervising physician accepts responsibility for supervising the physician assistant and that the physician assistant may not prescribe, dispense, or administer drugs until the supervising physician receives approval of the application.
- B. The Joint Board shall approve an application for Schedule II or Schedule III controlled substances delegation if the information submitted pursuant to subsection (A) and evidence produced by the applicant physician assistant shows the following:

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1. The physician assistant has the required training and experience;
  2. The physician assistant's professional record in performing health care tasks contains no evidence of:
    - i. An advisory or disciplinary action for prescribing, dispensing, or administering Schedule II or III controlled substances; or
    - ii. A restriction imposed by the DEA; and,
  3. A supervising physician and the supervising physician's agents are available.
- C. For approval of a delegation of authority to prescribe, dispense, or administer schedule II or schedule III controlled substances, the overall time frame described in A.R.S. § 41-1072(2) is 120 calendar days.
- D. For approval of a delegation of authority to prescribe, dispense, or administer schedule II or schedule III controlled substances, the administrative completeness review time frame described in A.R.S. § 41-1072(1) is 30 calendar days from the date the Joint Board receives all documents and information required by subsections (A) and (B).
1. If the required application is not administratively complete, the Joint Board shall send to the applicant a deficiency notice.
    - a. The notice shall state each deficiency and the documents and information needed.
    - b. Within 60 calendar days from the date of mailing of a deficiency notice, an applicant shall submit to the Joint Board the missing documents and information specified in the notice. The 30-day time frame for the Joint Board to finish the administrative completeness review is suspended from the date the Joint Board mails the deficiency notice to the applicant until the date the Joint Board receives the documents and information.
  2. If the application is administratively complete, the Joint Board shall send a written notice of administrative completeness to the applicant.
  3. If the submitted documents and information do not contain all of the components required by statute or rule, the Joint Board may send a written notice of denial of approval of a delegation of authority to prescribe, dispense, or administer schedule II or schedule III controlled substances.
- E. For approval of a delegation of authority to prescribe, dispense, or administer schedule II or schedule III controlled substances, the substantive review time frame described in A.R.S. § 41-1072(3) is 90 calendar days and begins on the date the Joint Board sends written notice of administrative completeness to the applicant.
1. During the substantive review time frame, the Joint Board may make 1 comprehensive written request for additional information.
    - a. Within 30 calendar days from the date of mailing of a comprehensive written request for additional information, the applicant shall submit to the Joint Board the requested additional information. The 90-day time frame for the Joint Board to finish the substantive review is suspended from the date the Joint Board provides the comprehensive written request for additional information to the applicant until the Joint Board receives the requested information.
    - b. The Joint Board shall issue a written notice of denial of delegation of authority to prescribe, dispense, or administer schedule II or schedule III controlled substances if:

- i. The applicant does not submit the requested information within the time frame in subsection (E)(1)(a); or
  - ii. The Joint Board determines that the applicant does not meet all of the substantive criteria required by statute or rule for delegation of authority to prescribe, dispense, or administer schedule II or schedule III controlled substances.
2. If the applicant meets all of the substantive criteria required by statute or rule for delegation of authority to prescribe, dispense, or administer schedule II or schedule III controlled substances, the Joint Board shall issue an approval to the applicant.

**R4-17-302. Employment Application**

If a physician's assistant is employed by more than 1 supervising physician, the physician's assistant shall file a separate application for approval of employment and job description for each supervising physician. The application shall indicate the days or hours per week that the physician's assistant expects to work for each supervising physician.

**R4-17-301, R4-17-302, Drug Labels**

All drugs dispensed by a physician assistant to whom the authority to dispense has been delegated by a supervising physician shall be labeled to show the following information:

1. Name and address of the dispensing physician assistant;
2. Name of the supervising physician;
3. Name of the supervising physician's agent supervising the prescribing of the drug, if applicable;
4. Name of patient;
5. Date dispensed;
6. Serial number of the prescription;
7. Name of the drug and directions for use; and,
8. Cautionary statements, if any, contained in the order.

**R4-17-303. Notification of Supervision**

- A. A physician assistant and supervising physician shall submit, on a form provided by the Joint Board, the following information:
1. The supervising physician's name, Arizona license number and issuance date, work address, and telephone number, field of practice, board certification, and ABMS/AOA certification number and the date it was issued;
  2. Whether the supervising physician's medical license has ever been revoked, placed on probation, restricted in any way, or suspended either by agreement or otherwise in any state;
  3. Whether the supervising physician's Drug Enforcement Administration registration or state prescriptive permit has ever been denied, restricted, suspended, lost, or revoked;
  4. Whether the supervising physician maintains hospital privileges and whether the hospital privileges have ever been denied, revoked, suspended, or limited in any way, and if so, provide an explanation;
  5. Whether the supervising physician supervises any other physician assistants, and if so, the names of the physician assistants supervised;
  6. Full name of the physician assistant, the physician assistant's Arizona certification number, work address, and telephone number and fax number;
  7. Whether the physician assistant has ever had a physician assistant certification, registration, or license refused, suspended, or revoked by another state or country for reasons that relate to the physician assistant's ability to

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- engage skillfully in the health care tasks of a physician assistant;
8. Whether the physician assistant's Drug Enforcement Administration registration or State prescriptive permit has ever been denied, restricted, suspended, lost, or revoked, and if so, an explanation;
  9. Whether the physician assistant maintains hospital privileges, whether the privileges have ever been denied, revoked, suspended, or limited in any way, and if so, provide an explanation;
  10. Number of days and hours per week that the physician assistant expects to work under the supervision of the supervising physician;
  11. Any other work addresses and phone numbers, including another supervising physician's name, if applicable, for the physician assistant;
  12. Full names, Arizona license numbers, and work addresses and telephone numbers for the supervising physician's agents;
  13. List of the health care tasks delegated to the physician assistant by the supervising physician;
  14. Whether the physician assistant maintains a special permit or certification to take x-rays from the Medical Radiological Technology Board of Examiners;
  15. Indication of the prescribing, dispensing and administration authority delegated to the physician assistant by the supervising physician;
  16. Certification, signed by the supervising physician, which assures that the supervising physician, the physician's agents and the physician assistant are familiar with the statutes and rules regarding physician assistants, the supervising physician accepts responsibility for supervising the physician assistant, and the physician assistant may not perform any health care task until the supervising physician receives written approval of the Notification of Supervision; and
  17. Whether the physician assistant position is a full- or part-time position, a geographically located site or a request for transfer in supervision.
- B. The Joint Board shall approve a physician to supervise a physician assistant only if the physician is engaged in the active practice of medicine.
- C. If a physician assistant is supervised by more than 1 supervising physician, the physician assistant shall file a separate application pursuant to subsection (A) for approval of the supervisory arrangement with each supervising physician.
- D. For approval of a notification of supervision, the overall time frame described in A.R.S. § 41-1072(2) is 120 calendar days.
- E. For approval of a notification of supervision, the administrative completeness review time frame described in A.R.S. § 41-1072(1) is 30 calendar days from the date the Joint Board receives all documents and information required by subsections (A) and (B).
1. If the application is not administratively complete, the Joint Board shall send to the applicant a deficiency notice.
    - a. The notice shall state each deficiency and the documents and information needed for completion.
    - b. Within 60 calendar days from the date of mailing of a deficiency notice, an applicant shall submit to the Joint Board the missing information specified in the notice. The 15-day time frame for the Joint Board to finish the administrative completeness review is suspended from the date the Joint Board mails the deficiency notice to the applicant until the date the Joint Board receives the documents and information.
  2. If the application is administratively complete, the Joint Board shall send a written notice of administrative completeness to the applicant.
  3. If the application and submitted documents and information do not contain all of the component required by statute or rule, the Joint Board may send a written notice of denial of approval of notification of supervision.
- F. For approval of a notification of supervision, the substantive review time frame described in A.R.S. § 41-1072(3) is 90 calendar days and begins on the date the Joint Board sends written notice of administrative completeness to the applicant.
1. During the substantive review time frame, the Joint Board may make 1 comprehensive written request for additional information.
    - a. Within 30 calendar days from the date of mailing of a comprehensive written request for additional information, the applicant shall submit to the Joint Board the requested information. The 90-day time frame for the Joint Board to finish the substantive review is suspended from the date the Joint Board provides the comprehensive written request for additional information to the applicant until the Joint Board receives the requested information.
    - b. The Joint Board shall issue a written notice of denial of notification of supervision if:
      - i. The applicant does not submit the requested additional information within the time frame in subsection (F)(1)(a); or
      - ii. The Joint Board determines that the applicant does not meet all of the substantive criteria required by statute or rule for approval of a notification of supervision.
  2. If the applicant meets all of the substantive criteria required by statute or rule for approval of a notification of supervision, the Joint Board shall issue an approval to the applicant.
- R4-17-303.R4-17-304.Reports**
- A. As a part of an investigation by the Joint Board or of an order of probation, the Joint Board may require a supervising physician to submit weekly reports on the performance of a physician assistant supervised by the in that supervising physician's employ. If the supervising physician is unavailable due to vacation, illness or continuing education, The the supervising physician's agent shall submit these reports during any the period that of unavailability the supervising physician is unavailable due to vacation, illness, or continuing medical education.
- B. Within 15 days of termination of supervision employment of a physician assistant, the supervising physician shall report to the Joint Board the reasons for and circumstances surrounding the termination.
- R4-17-304.R4-17-305.Supervision**
- A. A supervising physician shall not delegate health care tasks to a physician assistant if the supervising physician has does not have training in those tasks and or if the supervising physician does not perform performs those tasks.
- B. A physician assistant shall meet in person with the supervising physician at least once each week to discuss patient management. A physician assistant and supervising physician shall have with such additional meetings if as the Joint Board may determine determines after reviewing the notification of supervision, that additional meetings are necessary. The Such additional meetings specified on the notification of supervision may be conducted by telephone or radio rather than in person in lieu of additional in-person meetings.

**ARTICLE 4. REGULATION**

**R4-17-401. Civil Penalties**

- A. A physician assistant who violates A.R.S. § 32-2531(F) or (G) shall be subject to a civil penalty of 50 dollars.
- B. Upon determining that a physician assistant has violated A.R.S. § 32-2531(F) or (G), a Board official shall issue a written citation to the physician assistant that sets forth the following information:
  - 1. The name of the physician assistant.
  - 2. The date of and location at which the alleged violation occurred.
  - 3. The particular facts alleged to constitute a violation and the statutory provision alleged to have been violated.
  - 4. The physician assistant's right to request a hearing to contest the imposition of the civil penalty by filing a written request for hearing with the Joint Board within 15 days of receipt of the citation, and
  - 5. The name of the Board official issuing the citation.
- C. The citation in subsection (B) shall be served upon the physician assistant personally or by certified mail. A copy of the citation shall be simultaneously transmitted to the physician assistant's approved supervising physician.
- D. A physician assistant or the physician assistant's supervising physician may file a written request for hearing in accordance with R4-17-402. Unless appealed by the physician assistant or the physician assistant's supervising physician, the physician assistant shall pay the civil penalty within 30 days of the date the citation is served upon the physician assistant.
- E. A physician assistant who fails to pay a civil penalty within 30 days of service or upon receipt of a final order of the Joint Board that determines the physician assistant committed an alleged violation and affirms the imposition of the civil penalty may be subject to further disciplinary action by the Joint Board.
- F. A citation is public record and a copy shall be placed in the certification file of the physician assistant.

**R4-17-402. Request for Hearing**

A physician assistant upon whom the Joint Board imposes disciplinary action, including civil penalty, letter of concern, decree of censure, or probation, may request a hearing to contest the matter by filing a written notice with the Joint Board within 15 days of receipt of notice of the Joint Board's action. A hearing shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 6.

**R4-17-401.R4-17-403. Termination of employment Supervision**

- A. Termination of a physician assistant's supervision employment by a supervising physician shall not result in suspension or revocation of a physician assistant's certificate.
- B. The Joint Board shall immediately terminate a physician assistant's Notification of Supervision upon the suspension, revocation, or expiration of the physician assistant's certificate. Suspension, revocation, or expiration of a physician's assistant's certificate shall automatically result in immediate termination of employment as a physician's assistant and of all approved job descriptions.
- C. The Joint Board shall immediately terminate a physician assistant's supervision by a supervising physician upon receipt Receipt by the Joint Board of a summary suspension order or any final order of the Board of Medical Examiners or the Board of Osteopathic Examiners that which restricts, suspends, or revokes the supervising physician's license to practice medicine in Arizona of the person designated as the supervising physician shall automatically terminate the employment of all physician's assistants in that supervising physician's employ.

- D. The Joint Board shall immediately remove an agent's name from the physician assistant's Notification of Supervision upon receipt Receipt by the Joint Board of a summary suspension order or any final order of the Board of Medical Examiners or the Board of Osteopathic Examiners that which restricts, suspends, or revokes a supervising physician's agent's license to practice medicine in Arizona of the person designated as the supervising physician shall automatically terminate the employment of all physician's assistants in that supervising physician's employ.
- E. A physician assistant whose supervision by a supervising physician is terminated or a supervising physician's agent whose name is removed from the physician assistant's Notification of Supervision by the Joint Board in accordance with this Section may request a hearing to contest the matter by filing a written notice with the Joint Board within 15 days of receipt of notice of the Joint Board's action. A hearing shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 6.

**R4-17-402.R4-17-404. Rehearing**

- A. A motion for rehearing shall be filed as follows:
  - 1. Except as provided in subsection (B) of this rule, any party in a contested case who is aggrieved by a the decision of the Joint Board in such case may file a written motion for rehearing of the decision, specifying generally the grounds upon which the motion is based.
  - 2. A motion for rehearing shall be served and filed no later than 15 fifteen days after service of the decision of the Joint Board.
- B. If Where the Joint Board makes specific findings that it is necessary for a particular decision to take immediate effect in order to protect the public health and safety, or that a rehearing of the decision is impracticable or contrary to the public interest, the decision may be issued as a final decision without opportunity for rehearing and shall be a final administrative decision for purposes of judicial review.
- C. A written response to a motion for rehearing may be served and filed within 10 ten days after service of the such a motion by any another party. The Joint Board may require the filing of written briefs upon the issues raised in the motion and may provide for oral argument.
- D. A rehearing of a decision may be granted for any of the following causes materially affecting the rights of the moving party:
  - 1. Irregularity in the administrative proceedings by of the Joint Board or of its hearing officer, or by the prevailing party, or any ruling or abuse of discretion, that deprives whereby the moving party was deprived of a fair hearing.
  - 2. Misconduct of the Joint Board, or its hearing officer, or of the prevailing party.
  - 3. Accident or surprise that which could have not been prevented by ordinary prudence.
  - 4. Material evidence, newly discovered, which with reasonable diligence could not have been discovered and produced at the original hearing.
  - 5. Excessive or insufficient penalties.
  - 6. Error in the admission or rejection of evidence, or other errors of law that which occurred at the hearing.
  - 7. That The the decision is the result of a passion or prejudice.
  - 8. That The the decision or findings of fact are not justified by the evidence or are contrary to law.
- E. A rehearing may be granted to all or any of the parties and on all or part of the issues for any of the reasons set forth in subsection (D). The Joint Board may take additional

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testimony, amend findings of fact and conclusions of law, or make new findings and conclusions, and affirm, modify, or reverse the original decision.

- F. A rehearing, if granted, shall be only a rehearing of the question or questions with respect to which the decision is found erroneous, if separable. An order granting a rehearing shall specify with particularity the ground or grounds on which the rehearing is granted.
- G. Not later than ~~15~~ fifteen days after a decision is rendered, the Joint Board of its own initiative may order a rehearing for any reason ~~that which~~ it might have granted a rehearing on motion of a party. After giving the parties or their counsel notice and an opportunity to be heard on the matter, the Joint Board may

grant a ~~timely served~~ motion for a rehearing ~~timely served~~, for a reason not stated in the motion. In either case, the Joint Board shall specify in the order the grounds ~~for the rehearing therefor~~.

- H. When a motion for rehearing is based upon affidavits, they shall be served with the motion. The opposing party has ~~10~~ ten days after such service within which to serve opposing affidavits. ~~This which period may be extended for as many as 20 an additional period not exceeding twenty~~ days either by the Joint Board for good cause shown, or by the parties by written stipulation. The Joint Board may permit reply affidavits.

**NOTICE OF PROPOSED RULEMAKING**

TITLE 10. LAW

CHAPTER 3. DEPARTMENT OF LAW  
CIVIL RIGHTS DIVISION

PREAMBLE

- |   |  |
|---|--|
| 1. <u>Sections Affected</u><br>R10-3-402<br>R10-3-403 | <u>Rulemaking Action</u><br>Amend<br>Amend |
|---|--|
2. The specific authority for the rulemaking, including both the authorizing statute (general) and the statutes the rules are implementing (specific):  
Authorizing statutes: The authority of the Attorney General to adopt rules is set forth in A.R.S. § 41-192(B)(2) and 41-1492.06. Under the Arizonans with Disabilities Act of 1992, the Attorney General is required to adopt rules which do not exceed Titles II and III of the federal Americans with Disabilities Act, 42 USC §§ 12101 through 12213, and its implementing regulations, 28 CFR 35 and 36, and 49 CFR 37 and 38.

Implementing statutes: A.R.S. §§ 41-1492 through 41-1492.12

3. The name and address of agency personnel with whom persons may communicate regarding the rule:

Name:	Robbin M. Coulon, Assistant Attorney General Civil Rights Division
Address:	Attorney General's Office 1275 West Washington Phoenix, Arizona 85007
Telephone:	(602) 542-5263 or (520) 628-6500 (Tucson)
Fax:	(602) 542-1275 or (520) 628-6765 (Tucson)
TTY:	(602) 542-5002 or (520) 628-6872 (Tucson)

4. An explanation of the rule, including the agency's reason for initiating the rule:

R10-3-402 establishes the requirements for nondiscrimination by specified public transportation on the basis of disability in accordance with A.R.S. § 41-1492.05. The Section originally adopted and incorporated by reference provisions of 36 CFR 1191 and its accompanying appendix, which are merely guidelines adopted by the Architectural and Transportation Barriers Compliance Board regarding specified public transportation services by a private entity. This incorporation of the applicable provisions of 49 CFR 37 and 38 will include the guidelines and the federal regulations regarding specified public transportation services by a private entity and will make this provision consistent with all of the federal regulations that implement Title III of the ADA.

R10-3-403 establishes the requirements for nondiscrimination by public entities on the basis of disability in accordance with A.R.S. § 41-1492.01. Subsection (B), as amended, provides for the installation of curb ramps by public entities at locations serving state and local government offices and facilities. Subsection (B), as amended, is consistent with the federal rule and the applicable state statute. A.R.S. § 41-1492(A) states, in pertinent part:

"All buildings and facilities that are used by public entities and that are leased or constructed in whole or in part with the use of state or local monies, the monies of any political subdivision of this state or any combination of these monies shall conform to Title II of the American with Disabilities Act."

Title II of the ADA prohibits discrimination in the provision of public services, which includes access to streets and curb ramps at pedestrian walkways. This part of the Title II provisions is absent from Arizona law. A.R.S. § 41-1492.01(A) does not adopt the



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Title II provisions which relate to the provision of public services by public entities. *Cf.* 42 USC § 12132. Therefore, under Arizona law, public entities may be responsible for installing curb ramps at locations serving state or local government buildings or facilities. Public entities are required to provide curb ramps at locations serving places of public accommodation, places of employment, or the residences of individuals with disabilities under federal law, but not under state law.

5. A showing of good cause why the rule is necessary to promote a statewide interest if the rule will diminish a previous grant of authority of a political subdivision of this state:

Not applicable.

6. The preliminary summary of the economic, small business, and consumer impact:

R10-3-402 and R10-3-403, as amended, incorporate applicable federal regulations by reference so as not to exceed Titles II and III of the federal Americans with Disabilities Act and its implementing regulations. The purpose of these provisions is to set forth the applicable accessibility standards for specified public transportation are consistent with federal laws and to ensure that the requirements for nondiscrimination by public entities are within the scope of the statutory authority. See A.R.S. § 41-1492.01(A).

The accessibility standards set forth in R10-3-402 impose no actual additional costs to private entities providing specified public transportation services who should have complied with Title II and III of the ADA and their implementing regulations or the Rehabilitation Act of 1973. According to A.R.S. § 41-1492(13), "specified public transportation" means transportation by bus, rail or any other conveyance, other than aircraft, that provides the general public with general or special service, including charter service, on a regular and continuing basis.

Actual costs to a public entity for the implementation of R10-3-403(B) are difficult to measure because costs will depend on a number of variables, including the number of curb ramps that have not been installed at locations serving state and local government offices and facilities. Public entities have had since January 26, 1995, however, to comply with this same requirement pursuant to Title II of the federal law.

There are thousands of Arizona citizens who benefit from greater accessibility. The ability for Arizona citizens with disabilities to gain access to specified public transportation services or to have greater access because of the installation of curb ramps at locations serving state and local government offices and facilities is significant to their quality of life.

The benefits justify any additional costs to public entities or providers of specified public transportation services.

7. The name and address of agency personnel with whom persons may communicate regarding the accuracy of the economic, small business, and consumer impact statement is:

Name: Robbin M. Coulon, Assistant Attorney General  
Civil Rights Division

Address: Attorney General's Office  
1275 West Washington  
Phoenix, Arizona 85007

Telephone: (602) 542-5263 or (520) 628-6500 (Tucson)

Fax: (602) 542-1275 or (520) 628-6765 (Tucson)

TTY: (602) 542-5002 or (520) 628-6872 (Tucson)

8. The time, place, and nature of the proceedings for the adoption, amendment, or repeal of the rule or, if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rule:

Written comments will be accepted at the above address through June 20, 1997. A public hearing to receive oral comments regarding the proposed rules will be held as follows:

Date: June 17, 1997

Time: 1:30 p.m.

Location: Maricopa County Board of Supervisor's Auditorium  
205 West Jefferson  
Phoenix, Arizona 85003

The Attorney General follows Title II of the Americans with Disabilities Act. The Attorney General does not discriminate against persons with disabilities who wish to make oral or written comments on proposed rulemaking or otherwise participate in the public comment process. Individuals who need a reasonable accommodation (including auxiliary aids or services) to participate in the above scheduled hearing, or who require this information in an alternative format may contact the Phoenix Office of the Civil Rights Division.

To request an accommodation to participate in the public comment process or to obtain this notice in large print, Braille, or on audiotape, contact Roberta Dress at (602) 542-5263 (Voice); (602) 542-5002 (TDD); 1275 West Washington, Phoenix, Arizona 85007. Requests should be made as soon as possible so that the Attorney General's Office will have sufficient time to respond.

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9. Any other matters prescribed by statute that are applicable to the specific agency or to any specific rule or class of rules:  
A.R.S. § 41-1492.06(B) states that all rules adopted under the Arizonans with Disabilities Act shall not exceed the regulations, guidelines, and standards issued by the United States Departments of Transportation and Justice relating to Titles II and III of the Americans with Disabilities Act.
10. Incorporations by reference and their location in the rules:  
R10-3-402 incorporates by reference those provisions of 49 CFR 37 and 38, which relate to specified public transportation services by a private entity.  
R10-3-403 incorporates by reference 28 CFR 35.130(b)(4), 35.133, 35.135, 35.150, 35.151, 35.163, and Appendix A to 28 CFR 36.
11. The full text of the rules follows:

TITLE 10. LAW

CHAPTER 3. DEPARTMENT OF LAW  
CIVIL RIGHTS DIVISION

**ARTICLE 4. THE ARIZONANS WITH DISABILITIES ACT**

Section

- R10-3-402. Nondiscrimination on the Basis of Disability by Specified Public Transportation  
R10-3-403. Nondiscrimination on the Basis of Disability by Public Entities

**ARTICLE 4. THE ARIZONANS WITH DISABILITIES ACT**

**R10-3-402. Nondiscrimination on the Basis of Disability by Specified Public Transportation**

Owners and operators of specified public transportation shall comply with the provisions of ~~36 CFR 1191 and accompanying appendix, 49 CFR 37 and 38,~~ adopted September 6, 1991, relating to specified public transportation services by a private entity, which are adopted, incorporated by reference, and are on file with the Office of the Arizona Attorney General Civil Rights Division, P.O. Box 66738, Washington, D.C. 20035.

**R10-3-403. Nondiscrimination on the Basis of Disability by Public Entities**

- A. Public entities shall comply with the provisions of 28 CFR 35.130(b)(4), 35.133, 35.135, 35.150, 35.151, 35.163, and Appendix A to 28 CFR 36, adopted July 26, 1991, which are adopted, incorporated by reference, and are on file with the Office of the Arizona Attorney General Civil Rights Division,

the Office of the Arizona Secretary of State, and the United States Department of Justice Civil Rights Division, P.O. Box 66738, Washington, D.C.

- B. 28 CFR 35.150(c), as incorporated by this Section, is amended as follows:

1. A public entity shall comply with the obligations of this Section relating to provision of curb ramps or other sloped areas where existing public pedestrian walkways cross curbs at locations serving state and local government offices and facilities. ~~transportation, places of public accommodation, employers, and the residences of individuals with disabilities no later than January 26, 1997, but in any event, as expeditiously as possible.~~
2. ~~A public entity shall comply with the obligations of this Section relating to provision of curb ramps or other sloped areas where existing public pedestrian walkways cross curbs at areas not subject to subsection (B)(1) no later than January 26, 1997, January 26, 2005, but in any event, as expeditiously as possible.~~
3. ~~If a public entity has responsibility or authority over streets, roads, or walkways, its transition plan shall include a specific schedule for the installation of curb ramps or other sloped areas where pedestrian walkways cross curbs that complies with the requirements of subsections (B)(1) and (2).~~